

BEST AVAILABLE COPY

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<div> <div>A. Received by (Please Print Clearly)</div> <div>B. Date of Delivery</div> </div>	
1. Article Addressed to: Mr. Joachim Wottrich 808 Ferdinand Avenue Forest Park, IL 60130		C. Signature X <div> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee </div>	
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
2. Article Number (Copy from service label)		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
		7000 1670 0004 1399 5176	

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952